

**Testimony of the Mental Health Association in Michigan**  
*House Bills 5923 and 5927*  
House Health Policy Committee – November 28, 2006

Representative Gaffney and Members of the Committee,

I'm Mark Reinstein, President and CEO of the Mental Health Association in Michigan, the state's oldest advocacy organization for persons experiencing mental illness. We are affiliated with the National Mental Health Association and partly funded by local United Ways.

I appreciate the opportunity to testify in support of House Bills 5923 and 5927. These two bills emanate from the Governor's Commission on Mental Health, on which I served in 2004.

The bills are important symbolically, as they would be the first two statutory laws derived solely from the Mental Health Commission's work. If adopted, these bills can create momentum and help set the table for legislative follow-up of other Commission recommendations in 2007-08. The bills are also important substantively, and when Representative Gaffney recently convened a work group on them, they were supported without qualification by my organization, Michigan Protection and Advocacy Services, the Community Mental Health Boards Association, Michigan Psychiatric Society and Michigan State Medical Society.

HB 5927 would require that the Department of Community Health employ within its mental health unit a psychiatrist serving as Medical Director for Mental Health. A similar requirement has been in the Mental Health Code since 1996 for Community Mental Health programs. DCH would not have to hire and fund a new staff position to comply with this requirement. Establishing it in law would signal that this is as important for the Department as it is for Community Mental Health programs, and the position would be protected by law every time there's a change in administration at DCH, so that a future Department Director couldn't unilaterally decide he or she won't have such a position.

That same principle is important for HB 5923, clarifying Mental Health Code language on responsibility for supervision of the Department's Director of Recipient Rights. The Mental Health Commission felt strongly that protection and promotion of recipient rights is so important, its director should be reporting directly and solely to the Director of DCH. That may have been the intent of Code Section 754(1), but the Commission recognized that the DCH Director throughout the 1990s held a different interpretation of the language, which simply isn't strong enough. While the current DCH Director appears more comfortable with this concept than her predecessor, no one wants to risk another Department Director five or ten years down the road interpreting the Code in the same manner as was done in the '90s. HB 5923 will prevent that from happening.

These bills will give people hope about further follow-up of Mental Health Commission recommendations. They will also assure appropriate long-term attention within DCH to the importance of protecting recipient rights and weaving medical input into the development of mental health policy. We respectfully recommend that you report them favorably to the full House.

Thank you for your thoughtful consideration of our views.